									Application or Docket Number													
PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003									10691138													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL TYPE	ENTITY	OF		R THAN . ENTITY										
T	OTAL CLAIMS	8	47				.	RATE	FEE	7	RATE	FEE										
FOR			NUMBE	NUMBER FILED		NUMBER EXTRA		BASIC F	EE 385.00	OB	BASIC FEE	770.00										
TOTAL CHARGEABLE CLAIMS			8 ¥ minus 20=		. 64		•	X\$ 9=	576	OR	1,0,0	1										
INDEPENDENT CLAIMS			6 minus 3 =		3			X43=	129	OR	X86=											
М	JLTIPLE DEPE	NDENT CLAIM F	RESENT		Ø			+145= 14.5		OR												
* If the difference in column 1 is less than zero, enter *0" in column 2								TOTAL	659	OR												
CLAIMS AS AMENDED - PART II											OTHER											
_	1	(Column 1)	(Column 2) (Column 3			S	SMALI	ENTITY	OR	SMALL	ENTITY											
AMENDMENT A	6-270g	REMAINING AFTER AMENDMENT		NUME PREVIO	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	. 84	Minus	# 8°	+	=		X\$ 9=	7	OR	X\$18=											
	Independent	. 6	Minus	*** (0	=	Ī	X43=		OR	X86=											
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=	1 /	OR	+290=	/										
1 2								TOTAL		1	TOTAL											
1	0	(Column 1)		(Colum	n 2)	(Column 3)	A	DDIT. FEE	<u> </u>	OR	ADDIT. FEE	<u> </u>										
AMENDMENT B		CLAIMS		HIGHE	ST		Г		ADDI-	1		ADDI-										
		REMAINING AFTER AMENDMENT		PREVIO PAID F	USLY	PRESENT EXTRA		RATE	TIONAL FEE		RATE	TIONAL										
Š	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=											
AME	Independent	*	Minus	***		-		X43=		OR	X86=											
L	PINST PRESE	NTATION OF ML	JUNPLE DE	PENDENT	CLAIM	<u> </u>		+145=		OR	+290=											
TOTAL ADDIT. FEI									OR	TOTAL ADDIT. FEE												
		~				ADDII. FEE																
AMENDMENT C		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUMB PREVIOU PAID F	ST ER JSLY	(Column 3) PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE										
	Total	•	Minus	**		-	Γ	X\$ 9=		OR	X\$18=											
	Independent	•	Minus	***		•		X43=		OR	X86=											
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM										Ī												
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+290=											
or If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEEOR											TOTAL DDIT. FEE	·										
1	he "Highest Num	ber Previously Paid	For (Total or	Independen	t) is the	highest number	found	in the ap	propriate box	The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												